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NOT TO BE PUBLISHED IN OFFICIAL REPORTS

IN THE COURT OF APPEAL OF THE STATE OF CALIFORNIA

FIRST APPELLATE DISTRICT

DIVISION ONE

F.C. et al., Petitioners, v. SUPERIOR COURT OF SAN FRANCISCO COUNTY, Respondent; SAN FRANCISCO HUMAN SERVICES AGENCY et al., Real Parties in Interest.	A155778 (San Francisco City & County Super. Ct. Nos. JD17-3191A, JD17-3191B)

F.C. (Mother) and D.C. (Father) seek writ relief from an order terminating reunification services and setting the matter for a Welfare and Institutions Code section 366.26 hearing.[1] Both parents contend the juvenile court erred in finding the San Francisco Human Services Agency (Agency) provided them with reasonable services. Father additionally challenges the court's finding there was no substantial probability the parents' three youngest children, S.C., E.C., and N.C., would be returned to them with an additional six months of reunification services. We affirm.

[1] All further statutory references are to the Welfare and Institutions Code unless otherwise indicated.

BACKGROUND

In August 2017, the Agency received a report of general neglect of then one-year-olds S.C. and E.C., and two-month-old N.C. The report stated the minors' health was in decline and the infant was at risk of a failing-to-thrive diagnosis.

A social worker met the family four days later at San Francisco General Hospital. As anticipated, N.C.'s doctor made a failure-to-thrive diagnosis because the infant's weight "was now at the .09 percentile." The infant's length and head circumference had also decreased since his last appointment. One-year-old E.C., although not yet diagnosed with a specific nutritional problem, was similarly in the lowest weight percentile for a child his age. Despite being asked to stay in the hospital room to go over a feeding plan for N.C., and for administration of vaccinations, the parents left.

San Francisco Police officers, along with a social worker, subsequently conducted a home visit at the family shelter where the family was staying. The parents disputed that they had left the hospital despite instructions to stay, asserting medical personnel had told them the appointment was over and they were free to go. The minors were detained and placed in foster care.

The Agency filed a dependency petition, alleging the minors were at risk of "serious nutritional neglect." The petition recited that N.C. had been diagnosed with failure-to-thrive and "was already seriously underweight," and that E.C. was in the lowest weight percentile for a child his age. It additionally alleged E.C. and S.C. were "developmentally delayed," and S.C. had a "significant speech delay." It further alleged that, despite a family maintenance case having been opened four months earlier, the parents had failed to follow-through with a majority of the minors' medical appointments. The petition also alleged parents had lost custody of four older children, there was a history of domestic violence in parents' relationship and physical abuse of the children, and parents appeared "to have cognitive delays that make it overwhelming and difficult to make and keep appointments and benefit from medical instruction."

A month later, the Agency filed a first amended petition adding allegations that both parents had untreated mental health issues which affected their ability to provide

appropriate care for and supervision of the children, and that parents had neglected S.C.'s dental hygiene.

In its October disposition report, the Agency reviewed the parents' prior history with child welfare services, which began in 2010 in Georgia. The four oldest of parents' seven children reside in Georgia with their maternal grandmother. When parents failed to reunify with their three oldest children, the grandmother was granted legal guardianship. Mother then voluntarily relinquished their next oldest child to grandmother. Two of these four children had been diagnosed with fetal alcohol syndrome, and one was underweight.

Thereafter, parents moved several times. In 2015, they and their fifth child, S.C., moved to Louisiana. They then moved to Florida, where E.C., their sixth child, was born. When E.C. was one month old, they moved to South Carolina for a month before moving to North Carolina. They moved to California in March 2017, and N.C., their seventh child, was born two months later.

The report also detailed the condition of the three youngest children. All were malnourished. The Agency and medical providers were concerned parents had "grossly neglected the children's need for adequate food, medical care, and their developmental needs." The nutritionist stated Mother had "constantly been disrespectful" and disruptive during visits and did not "accept [] feedback and diet recommendations." The provider had since requested appointments without Mother in attendance, if possible.

S.C. additionally suffered from severe tooth decay, had been diagnosed with bottle-caries (bottle rot), and needed at least four caps on her teeth immediately. Although providers had indicated she also needed speech therapy, Mother disagreed "because [S.C.] talks to the parents."

E.C., in turn, additionally suffered from clubfoot, a medical condition " 'usually treated by serial casting' " to reshape the way the feet grow. In March 2017, E.C. had been referred to the University of California San Francisco orthopedics department for an urgent appointment. However, Mother " 'was a no show for the appointment.' " The parents subsequently took E.C. for treatment, but a month later, the Agency received

notice from St. Anthony's Medical Clinic that Mother had left E.C.'s casts on for three weeks despite being instructed the " 'casts were supposed to be on for one week.' " The social worker thus summarized that E.C. had "not received consistent medical care" because of the parents' frequent moves, and while E.C. had gained some weight since being detained, it was "still not enough to catch up [his] growth." In fact, parents had "missed about 50 percent" of the minor's scheduled medical appointments since May.

The concerns regarding alleged physical abuse by the parents and domestic violence by Father, however, were determined to be unfounded and evaluated out, respectively.

Father denied that his children were neglected and accused the Agency of taking "custody of his children because they are disabled and therefore the agency can collect money for the children." He claimed he and Mother had been unable to make the children's medical appointments because "their schedules were full" and they were not able to take the bus because it was hard getting on the bus with three children and a stroller. Mother, in turn, claimed they had, in fact, made "it to most of the appointments" and the Agency was unfairly expecting the family "to go to appointments on demand." Both parents disputed N.C.'s failure-to-thrive diagnosis, the concerns regarding E.C.'s weight, and that S.C. had any speech problems or developmental delays.

The Agency recommended, among other things, that both parents complete psychological or psychiatric evaluations, obtain stable housing, complete a parenting education program, and participate in medical planning and attend medical appointments for the children, and follow provider instructions. The report indicated the maternal grandmother wanted the three children placed with her if the parents failed to reunify.

In a November addendum, the Agency reported E.C. and N.C. had made "excellent progress" in gaining weight since being placed in foster care, and S.C. was scheduled for dental work in January 2018. However, both S.C. and E.C. suffered from developmental delays in speech. Although parents had been given referrals for assessments of S.C. and E.C.'s developmental delays, they had not followed through, and in October, Father told the social worker he intended to wait until the children were

returned to his care. In short, both parents "refused to consent to the GGRC [(Golden Gate Regional Cener)] assessments for both children."

The addendum summed up that parents continued to "be negligent of their children's educational, medical and emotional needs, even though necessary resources" had been made available to them. They did not attend all of the minors' medical appointments, and they canceled visitation with the minors "without good reason." There was also now an open case in Georgia concerning the parents' abandonment of their fourth child, who was now four years old.

The Agency continued "to be very concerned regarding the parents history, over the past seven years, of neglecting the needs of all seven of their children, and their repeated pattern of gross neglect of their children. The parents don't understand the consequences of their behavior on their children and, clearly, there are issues of mental health and perhaps substance abuse that impairs their judgment and ability to provide adequate and consistent parenting."

A month later, the Agency filed a second addendum reporting parents were "not engaged in any services at this time." However, in foster care, E.C. was making progress with his club foot treatments, and both he and N.C. now saw a nutritionist every other week, with E.C. additionally being referred to a feeding clinic due to his failure to gain adequate weight. S.C. continued to eat to the point of sickness unless she was monitored.

The parents asserted that until they were "ordered" to participate in services, they would not do so. They also refused to complete mental health and domestic violence assessments, despite being provided with financial assistance on the condition they participate in services.

At the December 2017 jurisdiction/disposition hearing, the court sustained the first amended petition, ordered reunification services, and set the matter for a six-month review hearing. The reunification plan required parents to participate in individual therapy, obtain psychological/psychiatric evaluations and follow the resulting recommendations, complete infant parent psychotherapy, complete parenting classes, and

participate in medical planning and instructions for the care of their children, attend medical appointments, sign any releases, and have regular visitation.

At or about this time, the parents moved to Sacramento, and Mother claimed she informed the juvenile court of the move at the end of December.

In April 2018, the parents filed section 388 petitions to enforce the court's December 2017 orders. Mother asserted she had not been referred to an individual therapist, parenting program, or a psychologist for an evaluation in Sacramento. She also claimed she needed the minors' medical record numbers so that she could verify appointment dates.

In its report for the section 388 hearing, the Agency detailed its referrals for services. At the end of January 2018, the social worker had sent referrals to the Foster Care Mental Health Program for both individual therapy and psychological testing, specifying the services needed to be in Sacramento, as both parents had relocated there. In February, the social worker contacted the Mental Health Program case manager to follow up on the referrals. The case manager stated that because both parents had a San Francisco based health plan, the social worker would have to refer them to San Francisco providers. The parents were then assigned two San Francisco therapists, and this information was provided to them in mid-February via text and e-mail. In March, the parents were additionally referred to two San Francisco providers for psychological assessment. Mother then told the Agency her Medi-Cal coverage " 'will not pay for anyone in [S]an [F]rancisco,' " and it would have " 'to find someone in [S]acramento.' " One of the San Francisco providers reported to the Agency that Mother had called and said "she cannot go to the appointment because she currently has Sacramento Medi-Cal." When the Agency social worker contacted a foster care eligibility worker, however, she was told the parents' Medi-Cal was still in the process of being transferred to Sacramento and the transfer would not be effective until April 1. In the meantime, the parents missed their March assessment appointments in San Francisco.

Also, in the meantime, after learning the parents' Medi-Cal coverage was being transferred to Sacramento, the Agency social worker also followed up with the Foster

Care Mental Health program. The social worker was directed to refer the parents to the Sacramento County Access Line (Access Line). Accordingly, by the end of March, the social worker had also sent the phone number of the Access Line to the parents and told them to call to schedule evaluations and therapy. The parents claimed they were unable to get either from the Access team because they " 'had not been diagnosed in California.' " The social worker tried to verify this from Access Line personnel, but could not obtain any information without a release. The social worker then obtained a one-day release from the parents and learned the Access team had not provided services not because of any diagnosis requirement, but because the parents had "denied having any symptoms, any history of mental health issues, or need for services."

Mother then complained in an April e-mail to the Agency social worker that she was not being apprised of the minors' medical appointments. The social worker responded that she had sent e-mails with the dates, times, and locations of the minors' appointments and attached copies of the January, February, March, April, and May e-mails she had sent. Out of 17 medical appointments, parents attended only five. Mother also accused the social worker of changing the minors' medical record numbers. The social worker therefore sent Mother the medical record numbers and told her the numbers were also listed on the appointment sheets she had sent.

In regard to parenting classes, the Agency social worker had spoken to the North Sacramento Family Resource Center regarding SafeCare parenting classes in January. She also had called In-Home Epiphany Center about SafeCare classes, and they told her the classes were "more beneficial for the parents with the children there." Accordingly, in February, the social worker made a referral to In-Home Epiphany SafeCare classes, and was notified via e-mail that the parents had been referred to a SafeCare worker at In-Home Epiphany. However, in March, a worker from In-Home Epiphany SafeCare informed the Agency social worker she had been unable to complete an intake assessment because she had not been able to contact the parents. At the end of March, the social worker asked the parents to contact In-Home Epiphany and provided their contact information. She also arranged for, and the parents agreed to, a SafeCare intake

to take place before or after the parents' visitation with the minors at the visitation center in San Francisco. However, in April, Mother contacted In-Home Epiphany and told them she could not do an intake assessment as she "has other appointments with the children and lives in Sacramento." The social worker again contacted In-Home Epiphany, confirming that the parents were in agreement with scheduling parenting classes for the same day as visitation. In-Home Epiphany said they would try again to coordinate with Mother. When the social worker followed up, In-Home Epiphany noted Mother had previously been referred in May 2017, but her case had been closed "due to 'lack of communication and participation.' " In connection with the most recent referral, Mother still had not scheduled an intake assessment and continued to express "frustration" because the services were not offered in Sacramento. In May 2018, In-Home Epiphany SafeCare personnel told the Agency social worker Mother had been contacted about an intake assessment, but had claimed conflicting schedules. Accordingly, In-Home Epiphany was working to move other clients around to accommodate parents. In the meantime, the Agency social worker had sent a referral for different parenting classes located in Sacramento.

The Agency social worker also reported she had addressed a complaint by parents that N.C. was being abused by the foster parent as evidenced by casts on his legs. The social worker explained that during N.C.'s orthopedic appointment the doctor felt his legs were "pronating" and it was necessary to put them in casts. The provider did not give the parents advance notification because the decision for treatment was made at the appointment, which the parents had failed to attend.

The Agency social worker also reported she had informed parents S.C. was scheduled for dental surgery in April 2018, but the surgery had been canceled for two reasons. First, parents had failed to return signed consent forms. Second, Mother had called the surgeon's office and instructed that no anesthesia could be used and that certain filling materials had to be utilized, and had threatened to sue the provider and had used threatening language with the staff. Mother continued to call the office after the surgery was canceled. The doctor was concerned about his own safety and the safety of his staff,

and therefore wanted "a court order both authorizing the procedure and forbidding the parents to be present." The next available surgical appointment was not until July.

In its June 2018 report for the six-month review hearing, the Agency reported the parents had found work sorting strawberries. Visitation with the minors in San Francisco was going well, and there had "been no reports of major concern." However, "[o]utside of visitation," the social worker reported parents' behavior had continued to prevent the children from receiving the care they needed. Both parents also continued to "deny [that they had] any mental health challenges."

In an effort to get S.C.'s dental work completed before July, the Agency social worker had attempted a referral to another dental surgeon. But that meant the surgery could not be completed at UCSF, and therefore the Agency had to find an in-network anesthesiologist, which it had not yet been able to do. However, S.C. was attending speech therapy twice a week, and there was some improvement in her speech. She also had stopped being "possessive about her food," and no longer ate until the point of sickness. E.C.'s speech and language development continued to be delayed. He was receiving physical therapy once a week, and while he had shown some improvement, he continued to have "impaired postural control." N.C. was also continuing to experience some developmental delays, but it was unclear if this was due to his failure-to-thrive diagnosis or a possible genetic syndrome. Both he and E.C. had undergone some testing, and the Department of Genetics at UCSF recommended further tests. Parents, however, "did not want any further testing."

San Francisco General Hospital had reported to the social worker that the phone number and address on file in their system for the minors had been changed from the foster parent's address to the parents' address and Mother's phone number. The foster parent, in turn, had expressed concern parents "may have knowledge of her home address," and had sent the social worker a seven-day notice of discharge for E.C. and N.C. The social worker was trying to preserve the placement, as a change would likely mean the boys would be split up. The foster parent had agreed to keep both minors until the end of May.

The parents, for their part, still had not had psychological/psychiatric evaluations. The Agency social worker had once again contacted the Foster Care Mental Health Program in May 2018 regarding services in Sacramento. She was told "all of the Sacramento County Family Reunification workers use the Access Line for all mental health services for parents." When the social worker explained that the parents had previously been denied services because they had denied any need for services in responding to Access Line questions, the social worker was given a list of five agencies that might be able to provide services. The first told the social worker the parents needed to call the Access Line, the second had already put in a referral for parenting classes but they only offered group counseling, not individual counseling. The social worker left a voice mail message at the third agency, and the others did not "provide the services needed to meet reunification requirements." The social worker stressed to the parents " 'the importance of answering the clinicians' questions appropriately and honestly' " when they called the Access Line for a referral. The worker also told them they could talk about their feelings of anger or stress about having their children removed and that would be sufficient to obtain services. The parents responded that "using words like those indicated symptoms of depression," and they were not depressed.

By the time the parents had agreed to participate in In-Home Epiphany SafeCare parenting classes in San Francisco in conjunction with visitation, the planned time had been filled. The social worker then faxed a referral for parenting classes at a center in Sacramento, but as of the date of the report, the referral was still pending. Finally, maternal relatives in Georgia had expressed an intent to care for the minors.

Based on the parents' "continued pattern of behavior" of interfering with the children's medical care, their lack of follow through, reluctance to give truthful information to the Access Line, and spotty attendance at the minors' medical appointments, the Agency recommended that services be terminated, and a section 366.26 hearing be set.

In an August addendum, the Agency updated the court on visitation. Out of eight scheduled visits, the parents had canceled three and the Agency had canceled two, so the

parents had visited with the minors three times. The parents still had not started either individual therapy or parenting classes. On July 13, the social worker had contacted an agency that stated they had parenting classes starting in four days. Another agency stated parenting classes would start in September. At the end of July, the social worker had received contact information for a counselor in Sacramento who might be able to provide individual therapy for the parents. The Agency remained of the opinion there was "no substantial likelihood [of] reunification" with an additional six months of services.[2]

At the six-month review hearing,[3] the court heard from a child protective services supervisor, a supervisor for the Agency's Medi-Cal benefits division, a Foster Care Mental Health Program case worker, and the child welfare social workers assigned to the case.

As relevant, two social workers had been assigned to the case. The first handled the case from January 2018 until her departure from the Agency in July. Accordingly, the worker's supervisor testified in her place. The supervisor detailed the parents' disruptive behavior. This included: changing the contact information with the children's medical providers to their own, instead of the foster parent's, information, resulting in at least one missed appointment; arguing and threatening medical providers, resulting in parents being barred from appointments unless accompanied by a social worker or in the children's appointments being canceled; failing to sign necessary consent and release

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[2] Respondent moves this court to augment the record on appeal with four documents: (1) the May 3, 2018 Birth & Beyond Family Resource Center referral for parenting classes; (2) a "GoFundMe Fundraiser page by Pamela Olson for the organization Save Our Children"; (3) documentation of the parents' request for the inter-county transfer of their Medi-Cal benefits from San Francisco to Sacramento; and (4) "the Affidavit of Custodian of Records for the Agency signed by . . . Custodian of Records and Director of Program Integrity and Investigations," which were introduced and received into evidence at the review hearing but not included in the clerk's transcript. The motion to augment is granted. (Cal. Rules of Court, rules 8.410, 8.155.)

[3] The six-month review hearing was continued several times with no objection by parents and commenced on September 25, 2018 and, after four days of hearings, concluded on November 13.

forms; and failing to tell the truth to Access Line personnel, resulting in the denial of mental health services.

The supervisor also testified Mother was "threatening and disrespectful to medical staff at the hospital at the children's appointments" and would "speak with hostility toward" the former social worker. Father had also made "hostile statements" to medical staff. On one occasion, visits with the minors were suspended because of the parents' behavior, and the resource center stated "they wouldn't resume until they had a meeting with the [social worker] and the parents" and the center staff together. The parents were asked not to attend the minors' nutritionist appointments and to attend other medical appointments only if accompanied by the social worker.

Mother also "sent lots of emails and texts and voice mails that were hostile" to the social worker. The worker noted a history of untruthful behavior "in the dispo report" where the parents had "lied about or misrepresented the exchanges with various service providers," including when the parents stated they were ineligible for services through the Access Line. Mother had also stated she and Father had completed the SafeCare program multiple times. However, when the worker followed up, she learned this was not true and parents had previously attended only five out of 18 sessions before "SafeCare closed the parents' case [in 2017] because of lack of participation."

The supervisor described parents' progress with their case plan as "[m]inimal." They had completed only six out of 18 sessions with SafeCare parenting classes, attended only 12 out of 28 scheduled visits with the children, did not obtain psychological/psychiatric evaluations, did not complete the infant parent psychotherapy program or attend individual therapy while in San Francisco nor when in Sacramento, and "[t]hey did not utilize the Access Line properly to get services." He stated the parents had moved to Sacramento prior to January 2018, but the children remained in San Francisco throughout the dependency. The parents' Medi-Cal remained in San Francisco until April 1, when it was transferred to Sacramento. The Agency had provided funds for transportation to services and had arranged to have the services on the same day as

visitation in San Francisco. (In fact, parents had received double funds for transportation since "they were actually driving together.")

The second social worker, who had been assigned to the case starting in July 2018, testified to the parents' continuing pattern of disruptive behavior. The minors' nurse practitioner told her it "was one of the most challenging cases she's ever had since becoming a nurse practitioner and that the parents are very hostile and disruptive during . . . medical visits and that it's really hard for the providers and the foster parents." In August, the nurse practitioner had asked that all appointments be attended by a case worker or supervisor because "even with a social worker present, the parents were still being intimidating towards staff and foster parents." Further, the parents had changed not only the contact information for the children, but had also attempted to change the medical providers, themselves, including the nurse practitioner and nutritionist.

The social worker also described the parents' participation in the case plan as "minimal." Since she had been assigned to the case, the parents had made none of the children's six medical appointments and, indeed, had attended only five out of 36 or 38 of the minors' medical appointments since January 2018. The parents had not completed SafeCare or infant parent psychotherapy. They completed nine of 18 sessions with SafeCare from February 2018 to April 2018, but had stopped attending after obtaining employment. The intake coordinator for infant parent psychotherapy "had reached out to the parents continuously through May and June in hopes to engage in the services but the parents were not responding to their calls." While the parents blamed their lack of participation in infant parent psychotherapy on the prior social worker, an intake coordinator at infant parent psychotherapy said their case had been closed due to "lack of engagement from the parents." The social worker also testified S.C. had not yet had her dental surgery because "the parents have not signed the consent" forms. The dental clinic was awaiting a court order prior to scheduling another surgery "to avoid any further incidents with the parents."

As late as August 2018, the parents maintained they "did not understand why the children were removed" and they "were going to all of the appointments that were

scheduled." The social worker did not believe there was a substantial probability of return by the date of the 12-month review, which was October 18.

The children, however, were thriving in foster care. S.C. had begun to talk. N.C. who had been in the .09 percentile for weight when he was removed was now in the 51st percentile, and E.C. was in the 64th. The goal was for the children to be placed with their maternal great aunt and maternal aunt in Georgia where they would be close to their four other siblings who were being raised by their maternal grandmother.

The case manager testified she had been assigned the case in November 2017. She received referrals for the parents' mental health services in January 2018, and the parents were provided with mental health service providers in San Francisco. She did not know parents had moved to Sacramento until a new referral came in April 2018. She testified she spoke to both social workers and to their supervisor regarding the parents' case, and that once the parents moved to Sacramento they were required to go through the Access Line to obtain services.[4]

The Medi-Cal benefits supervisor testified the parents contacted Medi-Cal for the first time on January 31, 2018, when Mother called to "request [a] transfer from San Francisco Medi-Cal to Sacramento." However, parents were in the process of recertifying and could not "initiate an inter-county transfer at that time." Father also called that same date to indicate "he and [Mother] were now married, and that the entire family had been reunited, and they moved to Sacramento." Father "indicated [a] household of five." On February 7, Mother made a request to transfer to Sacramento. At that point, the Agency noted "there was foster care found for the children as well as payments that we were seeing that were being issued through foster care," so they "needed clarification" on the "household composition." The Agency received clarification the next month, on March 8, when they were notified the children had been removed. After Mother completed a renewal for Medi-Cal, an inter-county transfer was

[4] The case manager testified the Access Line was an "800 number" that clients can call to obtain services after being "asked various questions" about their "medical or mental health needs," to access whether and what type of services are needed.

sent out on March 13, effective April 1. There was never "a lapse in Medi-Cal benefits" for the parents.

The parents also testified. They claimed they moved to a remote part of Sacramento in November 2017, and Father notified the Agency two days after the move. They also claimed they called to transfer their Medi-Cal from San Francisco to Sacramento in November, and were finally able to "initiate[] a transfer" in December.

Father asserted he had never agreed to engage in services in San Francisco, and claimed the social worker had never told him his Medi-Cal coverage had yet to be transferred to Sacramento and therefore services "could only be filled in San Francisco" until the transfer was effective. He further testified he had called the Access Line twice, but was told he did not qualify for services. According to Father, the first time he was told he "needed an actual diagnosis from a psychologist to even start the whole process." The second time he called, he claimed that the evaluator had in their possession a psychological evaluation, made during his time in Georgia, but it was not sufficient because the diagnosis "was not done by a psychologist, and it was not—they said that it was not a certified document." Father also claimed he had answered the evaluator's questions as suggested by the Agency social worker, but was still denied referrals. Father additionally claimed he had never participated in the evaluation that was in the CPS file, and denied having been diagnosed in Georgia with "polysubstance abuse, opioid dependence, and adjustment disorder, as well as a personality disorder NOS, mixed personality disorder with paranoid and antisocial and narcissistic features." He claimed he did not "have mental health issues" and the only reason his children were taken away was because the parents could not make it to medical appointments. Father disputed that E.C. had had nutritional issues and had been in the lowest percentile for weight, and he disputed that N.C. had had any medical condition and claimed the child had only developed problems after being removed. He also claimed the only reason his three older children had been removed was because of an unreliable babysitter and not because of "any mental health issues" on the part of the parents.

Both parents denied any obstructive behavior towards the minors' medical providers. Father described Mother as remaining "calm, cool, and collected" during appointments and asserted it was the nutritionist who was the problem and she had "pushed" Mother while Mother was holding their child. He also claimed he was "not noticed for any of the appointments from April 2018 to October 4th, 2018." He claimed he was "having a hard time [receiving] e-mails" from the Agency and that the parents had informed the court of this. However, when confronted with the fact that "there's no notation of that in the records," father stated "That's y'all's mistake; not mine." The parents' current social worker testified that "in all of the case notes," the parents had never mentioned having "issues with their e-mail."

Father claimed to have recently found a provider, but was waiting on his social worker to provide a referral, he had attended three parenting classes though had missed two due to illness, and he had been visiting the children once a week for three hours. He also claimed he did not know why the first visiting center had terminated their visitation.

Mother claimed the nutritionist "was very aggressive and violent, and I was afraid for my children to be around her because she pushed [me] with my child in my hands." She also denied having met with a psychologist in Georgia, despite the report showing she had done so, and believed she had never had a mental health diagnosis.

At the final hearing date, on November 13, 2018, Mother testified she and Father had just finished parenting classes the day before, and she brought her certificate of completion with her. Mother claimed she had now completed the SafeCare parenting classes program "three times," asserting previous social workers had proof of this, but had never given her the certificates of completion. Mother also claimed her social worker's "communication skills were poor" and she "never really communicated with me well."

Pamela Olson testified on the parents' behalf. She stated she was their "advocate," in that she helped "to explain to the [parents] the actual procedural court process, what certain definitions mean, what the process itself is, including ways for them to work within the process, how to discuss their case with their caseworkers, how to

navigate the system appropriately so they get the best possible outcome." She is the founder of Save Our Children. The parents also lived on her property in an in-law unit rent free and had been living there since November 2017.

The minors' attorney, however, agreed with the Agency's recommendations and conclusion that it would be detrimental to the children if they were to be returned to the parents and "there's no way this Court would make a finding that there's a substantial probability of [the minors] being returned by the next review."

The Agency, in turn, reported to the court that since the prior hearing in early October, the parents had missed two of their weekly visits with the children. One absence was due to the parents being stuck in traffic, and the second was due to Mother's illness, although Father also did not attend the visit. Although the visits were "going okay," there continued to be issues and "some concerns," so the social worker discussed having a meeting with parents and the visitation center staff to go over "guidelines and expectations."

After considering the numerous reports and the testimony, the juvenile court found return of the children would create a substantial risk of detriment to their health and well-being, both parents had failed to fully engage in ordered reunification services from January through May 2018, and had had "minimal" engagement from June through mid-November. The parents had not engaged "in any meaningful mental health evaluation, or assessment, or treatment since the detention of their children; nor have they participated in a meaningful way in any non mental health services other than completing the 16 sessions of parenting classes as of last night." The parents also still did not "acknowledge and accept responsibility for the initial reasons for the detention." The court accordingly terminated reunification services and found "that there's not a substantial possibility of the return of the children to the parents within the maximum 18-month time period allowed." The court further found "by clear and convincing evidence, that reasonable efforts have been provided, were offered to the parents," the "childrens' placement is both necessary and appropriate," and the Agency "has complied with the

case plan by making reasonable efforts to return the children to a safe home." The court ordered a permanent plan of adoption and set the matter for a section 366.26 hearing.

DISCUSSION

Reasonable Services

"The status of every dependent child in foster care must be reviewed periodically but not less than once every six months. (§ 366.) At the first six-month review hearing, 'the court shall order the return of the minor to the physical custody of his or her parents or guardians unless, by a preponderance of the evidence, it finds that the return of the child would create a substantial risk of detriment to the physical or emotional well-being of the minor.' (§ 366.21, subd. (e).) If the child is not returned home then the court must consider whether reasonable reunification services were provided and must order such services to be initiated or continued unless it finds clear and convincing evidence of certain factors which would render such services inappropriate." (*In re Heather B.* (1992) 9 Cal.App.4th 535, 544 (*Heather B.*).)

"At the 12-month review hearing the court must order the return of the minor to parental custody unless it finds, by a preponderance of the evidence, that a return to parental custody would create a substantial risk or detriment to the child's physical or emotional well-being. (§ 366.21, subd. (f).) If the child is not returned home then the court has certain options. If it finds that there is a substantial probability the child will be returned to the physical custody of a parent within six months or if it does not find clear and convincing evidence that reasonable reunification services were provided, then the court must continue the case for up to six months. (§ 366.21, subd. (g)(1).) Otherwise the court must order a hearing pursuant to section 366.26, to be held within 120 days. (§ 366.21, subds. (g)(2), (g)(3).)" (*Heather B., supra,* 9 Cal.App.4th at p. 545.)

Because of the special needs of infants and toddlers for permanency and stability, court-ordered services for children younger than three years of age—as the minors are here—are limited by statute to "6 months from the dispositional hearing . . . but no longer than 12 months from the date the child entered foster care. . . ." (§ 361.5, subd. (a)(1)(B); see *Fabian L. v. Superior Court* (2013) 214 Cal.App.4th 1018, 1027.)

We review a juvenile court's findings for substantial evidence. (*In re Alvin R.* (2003) 108 Cal.App.4th 962, 971; *Angela S. v. Superior Court* (1995) 36 Cal.App.4th 758, 763.) In doing so, we review the record in the light most favorable to the court's findings and draw all reasonable inferences in support thereof. (*In re Julie M.* (1999) 69 Cal.App.4th 41, 46.) " 'We do not reweigh the evidence or exercise independent judgment, but merely determine if there are sufficient facts to support the findings. . . .' " (*Kevin R. v. Superior Court* (2010) 191 Cal.App.4th 676, 689.)

Parents claim the Agency failed to offer them reasonable services. Specifically, Mother asserts she "did not get services which were tailored to her particular needs as she resided in Sacramento County but received no referrals for services in that county." In addition to the location of services, Father points to the timing of the Agency's referrals and claims "[t]here was no evidence that referrals were made" before January 26, 2018, despite disposition orders on December 13, 2017. He maintains his Medi-Cal status and the "issue of the Sacramento Access Line" were "barriers" to his ability to participate in services.

The record shows, however, that the Agency made *repeated* efforts to provide the appropriate services, including services in Sacramento, and that it was the parents' intransigent refusal to follow through and avail themselves of these services that resulted in their failure to comply in even modest respect with their case plan.

While Mother claims "had the Agency provided appropriate referrals for services in the area where [she] resided, she could have completed the services in the next six months in order to reunify with her children," both parents were told for months how to receive services through the Access Line, but failed to do so. In fact, parents impeded the provision of services. For example, the social worker set up two appointments with the parents to jointly call the Access Line, but the parents canceled both. Indeed, by the end of the review hearings, 11 months later, both parents were still denying any mental health issues, even in the face of written reports done in Georgia in connection with the dependency cases involving their older children.

While Father claimed he called the Access Line and answered questions as advised by the social worker, the social worker, in following up with the Access Line, learned the parents had, in fact, "denied having any symptoms, any history of mental health issues, or need for services." Father essentially claims there should have been no need for him to answer truthfully, given that this was "a case where mental health was a contested issue at disposition and where the court ultimately ordered therapy and psychological evaluations for both parties." However, he cites no authority supporting such an assertion. "Reunification services are voluntary, and cannot be forced on an unwilling or indifferent parent." (*In re Jonathan R.* (1989) 211 Cal.App.3d 1214, 1220.)

In light of the parents' refusal to obtain services through the Access Line, the social worker explored alternatives. She found a private physician network provider. However, that provider was over an hour away from the parents. She therefore contacted community partner agencies in Sacramento, but was told she either had to go through the Access Line or they did "not provide the services needed to meet reunification requirements." In September, she located two other providers. However, she subsequently learned the San Francisco Foster Care Mental Health Program would need to contract with these providers, and the timeframe for doing so would be four to six months.

Furthermore, the Agency had provided the parents with the resources they needed to promptly start services in San Francisco. For example, the social worker arranged for infant parent psychotherapy and SafeCare classes to occur either before or after their visitation with the minors in San Francisco, and parents had agreed to engage in services in these time frames. However, when the SafeCare intake coordinator, after several attempts, finally spoke with Mother, Mother claimed she could not "book an intake because [she] ha[d] other appointments with the children and she lives in Sacramento." Mother further delayed the process by telling the Agency social worker she had already completed SafeCare classes several times, and she could not do another class "at least until May 2018 because they do not allow clients to do their program more than once in [] 6 month[s]." The social worker followed up with SafeCare and learned this was not

true—although Mother had previously been referred to SafeCare in 2017, "[h]er case was closed on 11/10/17 due to 'lack of communication and participation.' " Nor was there any waiting period between classes.

Parents also had the opportunity to participate in psychological and individual therapy sessions in San Francisco until their Medi-Cal coverage was transferred to Sacramento, But, they either missed the appointments or canceled them, with the excuse their Medi-Cal status had already been transferred to Sacramento, even though they had been told the transfer would not take place until April 1.

The Agency additionally arranged for visitation and provided funds for transportation to each parent. The social worker also arranged for several alternatives when obstacles occurred. For instance, the Agency found alternative visitation centers after the parents' visits were suspended at the initial center due to their disruptive behavior. Visitation was also provided on weekends, first on Saturdays at the Agency and later on Sundays at the Antioch Family Resource Center, to accommodate the parents' work schedule.

The Agency also provided supervision for the children's medical appointments after some providers refused to have parents present without supervision. The parents were notified of the minors' appointments, but by the end of the review hearing, they had attended only five out of 36 or 38 appointments.

"The requirement that reunification services be made available to help a parent overcome those problems which led to the dependency of his or her minor children is not a requirement that a social worker take the parent by the hand and escort him or her to and through classes or counseling sessions." (*In re Michael S.* (1987) 188 Cal.App.3d 1448, 1463, fn. 5.) And the "standard is not whether the services provided were the best that might be provided in an ideal world, but whether the services were reasonable under the circumstances." (*In re Misako R.* (1991) 2 Cal.App.4th 538, 547 [observing in "almost all cases it will be true that more services could have been provided more frequently and that the services provided were imperfect"].) The record here amply

supports the juvenile court's finding that the Agency provided parents with reasonable services.

Substantial Probability of Return

Father additionally claims the juvenile court erred in finding he failed to make substantial progress in his reunification plan, there was a risk of detriment to the minors if returned to the parents and there was no substantial probability the minors would be returned to parents.[5]

Father acknowledges a "parent's compliance with his or her reunification plan is a pertinent consideration" in determining detriment to the minor, but asserts "the evidence and testimony demonstrate that [he] complied with his case plan by making repeated efforts to engage with his mental health providers, by visiting with his children, and by completing the parenting class." (§ 366.21, subd. (e)(1) ["The failure of the parent . . . to participate regularly and make substantive progress in court-ordered treatment programs shall be prima facie evidence that return would be detrimental."].) However, as we have discussed at length in the preceding section, the record and the testimony show otherwise. That Father finally completed parenting classes, on the eve of the last day of the review hearing, does not constitute sufficient compliance with his multi-faceted reunification plan.

Indeed, as the juvenile court found, even after a year of repeated efforts by the Agency to assist parents, they still failed "to acknowledge and accept responsibility for the initial reasons for the detention, specifically the failure to thrive and nutrition issues that the children have." In fact, they attended only a fraction of the children's medical appointments, and they continuously disrupted or impeded the minors' medical care.

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[5] Although Mother makes the bare assertion that the court "abused its discretion by its grant of an order regarding setting of a hearing, pursuant to . . . §366.26, based on insufficient evidence of [Mother's] failure to complete her court ordered services," she has failed to provide any supporting argument. She has therefore waived the issue on appeal. However, even had she not done so, such a claim would have been unavailing for the same reasons we reject Father's claim in this regard.

In short, substantial evidence also supports the court's finding of detriment and no likelihood the minors would be returned to the parents with additional reunification services. (See *In re Yvonne W.* (2008) 165 Cal.App.4th 1394, 1400–1401.)

DISPOSITION

The petition for extraordinary writ is denied on the merits and the request for stay is denied. (See Cal. Const., art. VI, § 14; *Kowis v. Howard* (1992) 3 Cal.4th 888, 894; *Bay Development, Ltd. v. Superior Court* (1990) 50 Cal.3d 1012, 1024.) The decision is final in this court immediately. (Cal. Rules of Court, rules 8.452(i), 8.490(b)(2)(A).)

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Banke, J.

We concur:

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Margulies, Acting P.J.

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Sanchez, J.